PTO/SB/82 (01-06)

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/081,801	1	<b>^</b> E_0 //	
	Filing Date 02/22/2002		ne	CEIV	ED .
	First Named Inventor	Joel R. Williams	CENTRA	. FAX (	CENTE
	Art Unit	2144	MAR	ñ 4 '	<b>ל</b> חחני
	Examiner Name	Peling A. Shaw	MAN	n I a	FAAL
	Attorney Docket Number	3501.2.1 NP			

I hereby revoke all previous powers of attorney given in the above-identified application.									
A Power of Attorney is submitted herewith.									
OR.									
I hereby appoint the practitioners associated with the Customer Number:				mber:	49309				
Please change the correspondence address for the above-identified application to:									
Customer Nu	associated with mber.	4830	g						
OR Simon									
Firm or Individual Name Advanta Law Group									
Address 9005 South 1300 East, Suite 200									
City	Sendy	Stale	UT		Zip	84004			
Country	USA								
Telephone	(801) 272-8368		Email mike@2petent.net						
I am the:  Applicant/Inventor.									
Assignce of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PYO/SB/96)									
SIGNATURE of Applicant or Assignee of Record									
Signature F	Willem								
Name JOÉL R. WILLIAMS									
	2טער		elephone	1 400 240 331					
NOTE: Signatures of all the invertors or equipment of record or me anais instruct or their representative(x) are required. Submit multiple forms if more than use signature is required, see below."									
2 Towns 1 towns 10 to									

This collection of information is required by S7 CFR 1.36. The imformation is required to obtain or retain is benefit by the public which is to file fand by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including genering, preparing, and submitting the combinated in form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form under suppositions for reducing this burden, should be sent to the Chief information Chicar, U.S. Faters and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS school TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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